

ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY (VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPAILD. NUMBER

INDO40888992

REACKNOWLEDGEMENT

CONSERVATION CHEM CO

BOX 6066 INDUSTRIAL

GARY

IN 46406

INSTALLATION ADDRESS

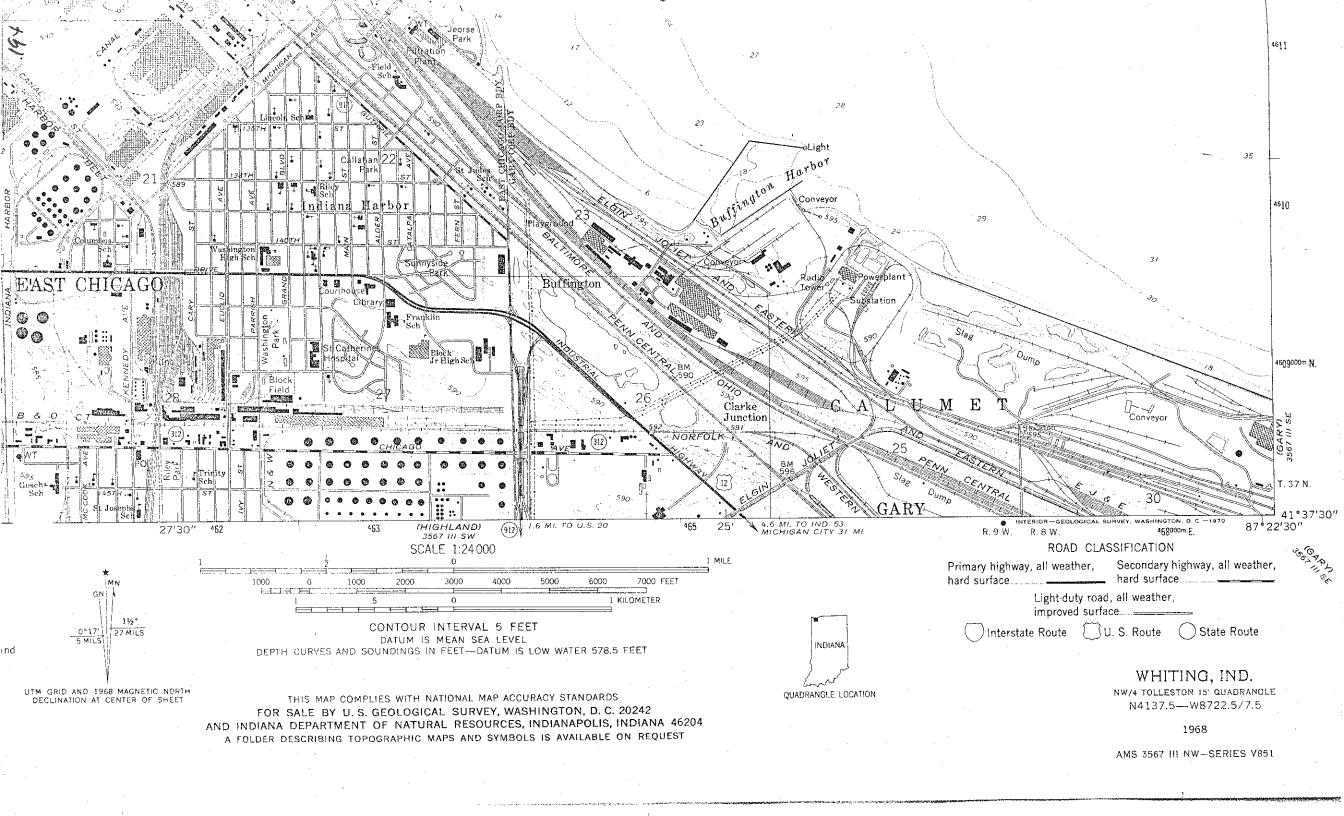
6500 INDUSTRIAL HIGHWAY

GARY

IN 46406

EPA Form 8700-128 (4-80)

09/28/81





106 West 14th Street Suite 2406 Kansas City, Missouri 64105 Area code 816-421-8494

February 19, 1981

Y. J. Kim
Environmental Protection Agency
Region V
RCRA Activities Office
P.O. Box 7861
Chicago, Illinois 60680

Dear Mr. Kim:

Herein are code numbers of waste generators we are interested in in Region V:

K062			F007
P029	(4)		F008
P030			F009
P063			F010
P090			F011
P098			F012
P104			F015
P106			
P121			

We are endeavoring to locate sources of copper, copper salt and iron salt in a reclamation effort.

Yours very truly,

CONSERVATION CHEMICAL COMPANY

Norman B. Hjersted

President

NBH/psc

sub to potification

AUG 18 1980

AUG 1: 1980

A. HAZARDOUS WASTES F waste from non-specific so	ROM NON-SPECIFIC	SOURCES. Enter the	four-digit number from	40 CFR Part 261.31 fo	r each listed hazardous
F 0 0 8	2 F 0 0 2 23 26 8 F 0 0 9	3 F 0 0 3 23 - 26 9	4 F 0 0 5 23 - 26	5 F006 23 - 26	6 7 26 12
B. HAZARDOUS WASTES FI specific industrial sources y			igit number from 40 CF		isted hazardous waste from
13 K 0 4 9 23 - 26	14 K062	15 K 0 6 3	16	17	18
19	20	21	22 - 26 28	23 - 26 29	23 - 26
C. COMMERCIAL CHEMICA stance your installation has	L PRODUCT HAZAR	DOUS WASTES. Enter azardous waste. Use ad	the four—digit number of ditional sheets if necessa	rom 40 CFR Part 261.3	3 for each chemical sub-
31	32	33	34	35	36
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
D. LISTED INFECTIOUS WA hospitals, medical and rese					e from hospitals, veterinary
49	50	51	52	-53	54
E. CHARACTERISTICS OF I hazardous wastes your inst	allation handles. (See				eristics of non—listed
X, CERTIFICATION		002)	(6000)		(D000)
I certify under penalty attached documents, and I believe that the submit mitting false information	d that based on my tted information is	inquiry of those inc true, accurate, and c	lividuals immediately omplete. I am aware	responsible for obta	ining the information,
SIGNATURE Loyd T. K FPA Form 8700-12 (6-80) B	auseu Everse	a la	Kaiser, Ad	A Print s	8/18/80

CENTRAL INFORMATION Characteristic Permissipages (Bus De Council Institution February 1 1 1 1 1 1 1 1 1	The state of the s	nch).	PROPERTION & CENCY	Form Approved OMB No. 55	8-R0175 [94
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FACILITY MAILING ADDRESS GREY. IN 46406 WE ACCIDENT THE COLOR THE STATE OF THE STA		CHEM. CO		appropriate fill-in area belo	w. Also, if any of
EXCILITY INTERCLICION THE POLLITANT CHARACTERISTICS INSTRUCTIONS: Complete A through 3 to determine whether you need to submit any permit application forms to the EQ. If you share, "We have uput the complete of the comp	C FACILITY BOX 6066 THE	15777 TH		left of the label space list that should appear), please	s the information provide it in the
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NSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you snower "yes" to any querients, you must submit this form and the supplemental form listed in the percenthesis following the question. Mark "N" in the loos in the third column, if the supplemental form is studened. If you arrow "n" in oach question, you need not bushed any other "need to receive the proposed of the instructions. See also, Section D of the instructions for definitions of bold-feed thems. **SPECIFIC QUESTIONS** **ARTA **ARTOR **ARTO	VI. FACILITY VI. LOCATION THE STATE OF THE	USTRIAL 186		items if no label has been the instructions for detail	provided, Refer to led item descrip-
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to, waters of the U.S. other than those described in A or 8 abovel **[FORM 2]	which results in a discharge to waters of the U.	S .?	include a concer aquatic animal p discharge to wate	strated animal feeding operation or roduction facility which results in a rs of the U.S.? (FORM 2B)	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3) G. Do you or will you inject at this facility any produced wastes? (FORM 4) G. Do you or will you inject at this facility any produced wastes or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for inhanced recovery of your or advanced by the control of the co	to waters of the U.S. other than those described	in X	in A or B above	/ which will result in a discharge to	25 26 27
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids used for enhanced recovery of oil or natural gas, or inject fluids used for enhanced recovery of oil or natural gas, or inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbona? (FORM 4) 1. Is this facility a proposed stationary source which is one of the 28 industrial categories is the state of care and a state of season and the control of the 28 industrial categories is the state of the 28 industrial categories is the state of the control of the 28 industrial categories is the state of the control of the 28 industrial categories is the state of the control of the 28 industrial categories is the state of the control of the 28 industrial categories is the state of the 28 industrial ca	E. Does or will this facility treat, store, or dispose	of X	F. Do you or will y municipal effluer taining, within	ou inject at this facility industrial or nt below the lowermost stratum con- one quarter mile of the well bore,	X
duction, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids to storage of liquid hydrocarbona? (FORM 4) 1. Is this Scillty a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5) 11. Is this Scillty a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5) 11. NAME OF FACILITY 12. SKIP CONSERVATION CHEMICAL COMPANY OF ILLIAN STATE OF AND STATE OF PODE 2. WILLIAMS IAMES TITLE (last, first, & title) 3. STREET OR P.O. BOX 2. WILLIAMS IAMES TITLE (last, first, & title) 3. STREET OR P.O. BOX 3. STREET OR P.O. BOX 4. STREET OR P.O. BOX 5. O. J. N. D. J. T. D. L. L. L. B. S.	water or other fluids which are brought to the surf	ced ace	H. Do you or will y cial processes su	ch as mining of sulfur by the Frasch	
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CONTINUED FROM THE FRONT VII. SIC CODES (4-digit, in order of priority)			
A, FIRST		Naga, makembaka gapaka jalah sabagai mili mili mili atau a ji mili ja hara ja	SECOND
7 28 19 (specify) Industrial Inorgan	ic Chemicals, Not = 79.	(specify)	liable Establishments
TE 16 LIST WHEYE CLASSIFIED	15 16		FOURTH
(specify)	ź.	(specify)	·
VIII. OPERATOR INFORMATION	15 16	9	
	A. NAME		B. Is the name listed in Item VIII-A also the
B CONSERVATION CH	EMICAL COM	PANY OF I	owner? L 2 1 NO 1 YES - NO
18. 19			
C. STATUS OF OPERATOR (Enter the appr F = FEDERAL M = PUBLIC (other than)	Managara etata (D. PHONE (area code & no.)
S = STATE O = OTHER (specify) P = PRIVATE	P (specify)		3 1 2 7 3 4 2 4 4 1 5 10 10 10 21 22 22 28
E, STREET OF			
P 0 B0 x 6066			
26. F. CITY OR TOWN	v I		K. INDIAN LAND
BGARY		IN 46406	s the facility located on Indian lands? — YES NO
33 16	. 40	A1 A2 47 - 51	52
X. EXISTING ENVIRONMENTAL PERMITS		Managary symptom Managary symposite process of transcriptions	
A. NPDES (Discharges to Surface Water)	D. PSD (Air Emissions from Pr	oposed Sources)	
9 N N A	9 P N A	30	
B. ปเต (Underground Injection of Fluids)	E. OTHER (specif	ernamen an erner finan en en paramental i verzer denne verbieren antilderen entder	
9 U N A	9 NA	(specif)) -
15 16 17 16 - 36 C. RCHA (Hazardous Wastes)	18 16 17 18 - E, OTHER (speci)	<u>。 </u>	
9 R N.A.	N.A.	(specify	7)
	15 16 17 10 -	30	
Attach to this application a topographic ma	o of the area extending to at leas	t one mile beyond prope	rty bounderies. The map must show
the outline of the facility, the location of e treatment, storage, or disposal facilities, and	ach of its existing and proposed	l intake and discharge st	ructures, each of its hazardous waste
water bodies in the map area. See instruction		a underground. Include	all spilligs, live s and other surface
XII. NATURE OF BUSINESS (provide a brief descri	ption)>		
Conservation Chemical Company	of Illinois manufactu	ires iron salts w	hich are used as
coagulant aids in the treatme	nt of both potable and	l waste waters.	Some of the raw materials
used to produce our finished	products are hazardous	wastes (e.g., p	ickle liquor from the
steel industry). In some ins wastes from the generator's f	tances, we are paid to acility. As a consequ	remove pickie i mence, we are als	o a service facility
providing an outlet for speci	fic types of hazardous	wastes that can	he recycled
store	lose than trude load	auantities of has	varidous waste in drums. They
\mathbf{I}	of in the struck load of	compatible arums	can be entired to an approve
I some The same prices lightly to	jastes will be dedrumn	red and sloved 1	be that when the track the tr
accumulated. It will then be	transported to an appi	toyed treatment to	ecitify,
XIII, CERTIFICATION (see instructions)			
I certify under penalty of law that I have p attachments and that, based on my inquir	y of those persons immediately	responsible for obtaini	ng the information contained in the
application, I believe that the information is false information, including the possibility of		am aware that there ar	e significant penalties for submitting
A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	. 1	C, DATE SIGNED
Norman D. Historia - Dungidan	+ MB the	isted, Preside	int 11-18-80
Norman B. Hjersted, Presiden		· · · / / · · · · · ·	707
C I I I I I I I I I I I I I I I I I I I			
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riease print or type in the unshaded areas only (fill—in are are spaced for elite type, i.e., 12 characters/inch). Form Approved OMB No. 158-S80004										
FORM U.S. IRONMENTAL PROTECTION AGENCY HAZARI IS WASTE PERMIT APPLICATION 1. EPA I.D. NUMBER										
Consolidated Permits Program (This information is required under Section 3005)	FIND040888992									
FOR OFFICIAL USE ONLY	《新沙·斯尔· 斯尔·斯尔·斯尔·斯尔·斯尔·斯尔·斯尔·斯尔·斯尔·斯尔·斯尔·斯尔·斯尔·斯									
APPROVED (yr. mo., & day)	COMMENTS									
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II. FIRST OR REVISED APPLICATION										
Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.										
A. FIRST APPLICATION (place an "X" below and provide the appropriate date) \[\begin{align*}										
8 6 7 0 4 7 7 78 POPERATION BEGAN OR THE DATE CONSTRUCTION (use the boxes to the left)	mo., & day) OMMENCED YR. MO. DAY (yr., mo., & day) OPERA- TION BEGAN OR IS EXPECTED TO BEGIN									
B. REVISED APPLICATION (place an "X" below and complete Item I above) 1. FACILITY HAS INTERIM STATUS	2. FACILITY HAS A RCRA PERMIT									
III. PROCESSES — CODES AND DESIGN CAPACITIES										
A. PROCESS CODE — Enter the code from the list of process codes below that best described entering codes. If more lines are needed, enter the code(s) in the space provided. If a process (including its design capacity) in the space provided on the form (I)	process will be used that is not included in the list of codes below, then									
PROCESS DESIGN CAPACITY — For each code entered in column A enter the capaci AMOUNT — Enter the amount.	ty of the process.									
 UNIT OF MEASURE — For each amount entered in column B(1), enter the code for measure used. Only the units of measure that are listed below should be used. 	om the list of unit measure codes below that describes the unit of									
PRO- APPROPRIATE UNITS OF CESS MEASURE FOR PROCESS	PRO- APPROPRIATE UNITS OF CESS MEASURE FOR PROCESS									
PROCESS CODE DESIGN CAPACITY Storage: Treatme	PROCESS CODE DESIGN CAPACITY Int:									
CONTAINER (barrel, drum, etc.) S01 GALLONS OR LITERS TANK TANK S02 GALLONS OR LITERS	T01 GALLONS PER DAY OR LITERS PER DAY									
CUBIC METERS	CE IMPOUNDMENT T02 GALLONS PER DAY OR LITERS PER DAY RATOR T03 TONS PER HOUR OR									
Disposal:	METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR									
would cover one acre to a thermal	(Use for physical, chemical, TO4 GALLONS PER DAY OR or biological treatment LITERS PER DAY									
HECTARE-METER surface LAND APPLICATION D81 ACRES OR HECTARES ators. I	s not occurring in tanks, impoundments or inciner- lescribe the processes in									
OCEAN DISPOSAL D82 GALLONS PER DAY OR the space LITERS PER DAY SURFACE IMPOUNDMENT D83 GALLONS OR LITERS	e provided; Item III-C.)									
UNIT OF	UNIT OF UNIT OF									
UNIT OF MEASURE CODE UNIT OF MEASURE	MEASURE CODE UNIT OF MEASURE CODE									
GALLONS	D HECTARE-METER									
CUBIC METERS C GALLONS PER HOUR GALLONS PER DAY U LITERS PER HOUR	E HECTARESQ									
EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gal	A facility has two storage tanks, one tank can hold 200 gallons and the									
S DUP T/A C \										
B PROCESS DESIGN CAPACITY	B. PROCESS DESIGN CAPACITY									
U CESS 2. UNIT OFFICIAL W	PRO- SESS 2. UNIT OFFICIAL									
Za (from list Specify) Sure USE Za (fr	ODE om list bove) 1. AMOUNT OF MEA-SURE (enter code)									
X-1 S 0 2 600 G 5										
X-2 T 0 3 20 E 6										
1 5 0 1 . 100,000										
1 S 0 1 100,000 G 7 2 S 0 2 620,000 G 8										
3 0 1 7 100,000										
2 S 0 2 620,000 G 8	- 18 19 - 27 ZE Z9 - 35									

III. PROCESSES (continued)									
C. SPACE FOR ADDITIONAL PROCESS CODES INCLUDE DESIGN CAPACITY.	FOR DESCRIBING OTHER PR	OCESSES (code "1 FOR EA	ACH PROCESS ENTERED HERE						
Do Age Called Back of Section 1									
		8 27 W							
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A CONTRACTOR OF THE CONTRACTOR	produktytyspin.	and the second of the second	But a philling angulged has been						
IV. DESCRIPTION OF HAZARDOUS WASTES									
A. EPA HAZARDOUS WASTE NUMBER — Enter the handle hazardous wastes which are not listed in 40	CFR, Subpart D, enter the fou	-digit number(s) from 40 CFR, S	ubpart C that describes the characteris-						
tics and/or the toxic contaminants of those hazardon									
B. ESTIMATED ANNUAL QUANTITY — For each libasis. For each characteristic or toxic contaminant which possess that characteristic or contaminant.	entered in column A estimate the	e total annual quantity of that we a total annual quantity of all the n	aste that will be handled on an annual on—listed waste(s) that will be handled						
C. UNIT OF MEASURE - For each quantity entered	I in column B enter the unit of	measure code. Units of measure v	which must be used and the appropriate						
codes are:									
ENGLISH UNIT OF MEASURE POUNDS		METRIC UNIT OF MEASURE KILOGRAMS							
TONS		METRIC TONS							
If facility records use any other unit of measure for account the appropriate density or specific gravity or		e must be converted into one of th	e required units of measure taking into						
D. PROCESSES									
PROCESS CODES: For listed hazardous waste: For each listed hazardous.	zardous waste entered in colum	n A select the code(s) from the lis	of process codes contained in Item III						
to indicate how the weste will be stored, treated, For non-listed hazardous wastes: For each chi	, and/or disposed of at the facilit	٧.							
contained in Item III to indicate all the proces									
that characteristic or toxic contaminant. Note: Four spaces are provided for entering	process codes. If more are need	ed: (1) Enter the first three as de	scribed above; (2) Enter "000" in the						
extreme right box of Item IV-D(1); and (3) Ente									
2. PROCESS DESCRIPTION: If a code is not liste	d for a process that will be used,	describe the process in the space p	provided on the form.						
NOTE: HAZARDOUS WASTES DESCRIBED BY MO more than one EPA Hazardous Waste Number shall be of			rdous wastes that can be described by						
Select one of the EPA Hazardous Waste Number quantity of the waste and describing all the procure.	rs and enter it in column A. On t	he same line complete columns B,	C, and D by estimating the total annual						
2. In column A of the next line enter the other E "included with above" and make no other entrie	PA Hazardous Waste Number t		aste. In column D(2) on that line enter						
3. Repeat step 2 for each other EPA Hazardous Wa		describe the hazardous waste.							
EXAMPLE FOR COMPLETING ITEM IV (shown in).	ine numbers X-1, X-2, X-3, and	X-4 below) - A facility will treat a	nd dispose of an estimated 900 pounds						
per year of chrome shavings from leather tanning and are corrosive only and there will be an estimated 200	pounds per year of each waste.	The other waste is corrosive and							
100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill. D. PROCESSES									
III HAZARR P POPULATION OF	SURE 1. PROCESS		PROCESS DESCRIPTION						
ZO WASTENO QUANTITY OF WASTE	(enter code)		a code is not entered in D(1))						
X-1 K 0 5 4 900	P T 0 3 D 8 0								
X-2 D 0 0 2 400	P T 0 3 D 8 0								
X-3 D 0 0 1 100	P T 0 3 D 8 0								

Continued from the front.

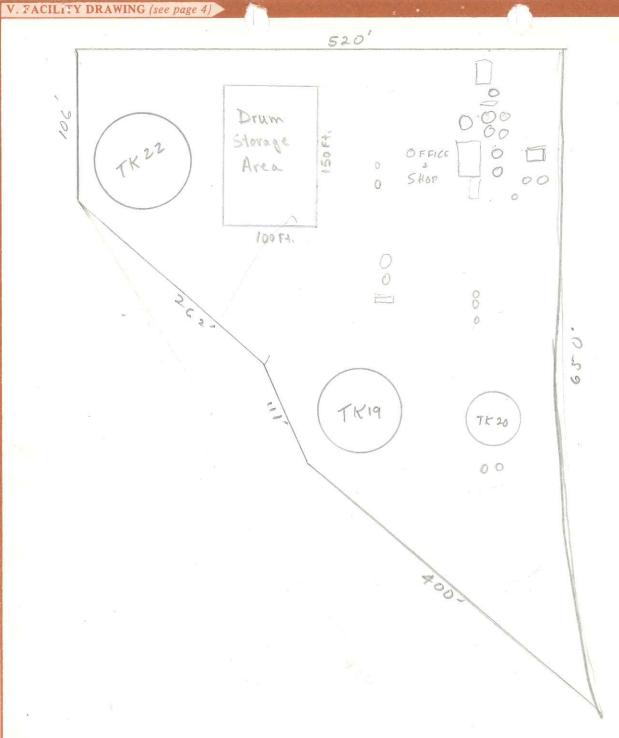
included with above

Cont NOT	Continued from page 2. NOTE: Photocopy this page before completing if y ave more than 26 wastes to list. Form Approved OMB No. 158-S80004												
TS.			T		BER (enter from page 1)		1	5		FC	ROFFICI	AL USE	T/Ac
W		V D	0	4	0 8 8 8 9 9 2 1	1	/	W	2		DUP		2 DUP
					N OF HAZARDOUS WASTE			nue		1100			
LINE	0	A. HAZ VAS	AR	D.	B. ESTIMATED ANNUAL QUANTITY OF WASTE	OF	UNIT MEA URE inter		1	. PROCE	SS CODES		D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
	Ž	(ente	rco	de)	27 - 35	C	ode)	27	- 29	27 - 29			(if a code is not entered in $D(1)$)
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Continued from the front,

IV. DESCRIPTION OF HAZARDOUS WAS?

(continued)



SCALE: 1 INCH = 100 FEET

GARY, IND.



106 West 14th Street Suite 2406 Kansas City, Missouri 64105 Area code 816-421-8494

December 3, 1980

Environmental Protection Agency Region V, RCRA Activities P.O. Box 7861 Chicago, Illinois 60680

RE: Conservation Chemical Company of Illinois

EPA I.D. No. IN D040888992

Gentlemen:

On November 18th, 1980, we submitted to you Part A of the RCRA permit application. In so doing, we failed to include photographs of our facility. Those photographs are enclosed herewith.

Very truly yours,

CONSERVATION CHEMICAL COMPANY OF ILLINOIS

Lloyd T. Kaiser/psc Lloyd T. Kaiser

Marketing Manager

LTK/psc

Enclosures (7 photographs)





106 West 14th Street Suite 2406 Kansas City, Missouri 64105 Area code 816-421-8494

November 19, 1980

EPA Region 5 RCRA Activities P.O. Box 7861 Chicago, Illinois 60680

RE: Conservation Chemical Company of Illinois

EPA I.D. No. IND040888992

Gentlemen:

On November 18th, 1980, we submitted to you Part A of the RCRA permit application. In reviewing Form 3 of Part A, we discovered that we had failed to include applicable information on pages 1, 3 and 5. The attached pages 1, 3 and 5 contain the information left off originally. We submit these as amendments to our initial application.

We are also enclosing complete topographic maps of the Highland and Whiting, Indiana quadrangles. Although we have already submitted the applicable portions of these maps with Form 1, the larger sheets provide a better indication of the plant location.

Please let us know if you have any questions about the foregoing.

Very truly yours,

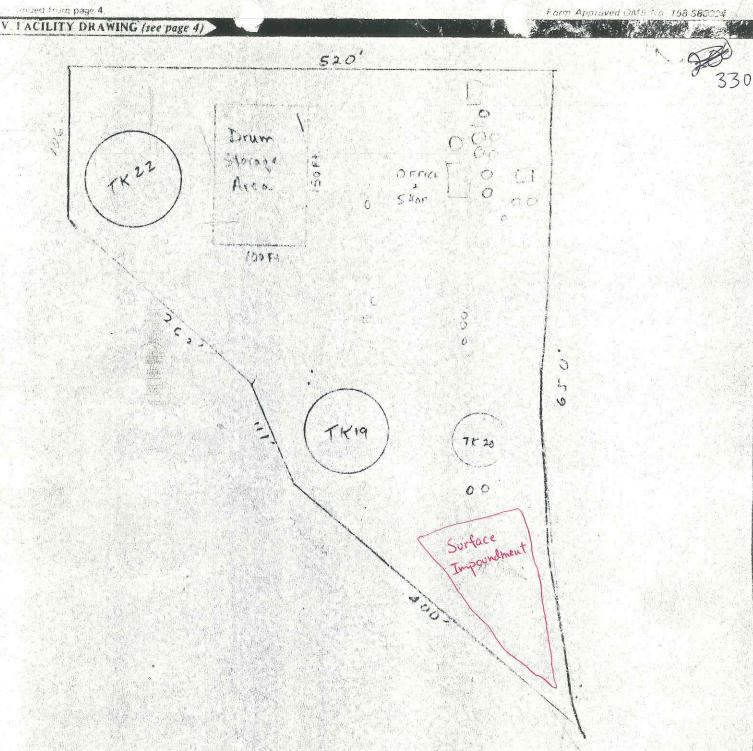
CONSERVATION CHEMICAL COMPANY OF ILLINOIS

Norman B. Hjersted

President 6

NBH/psc

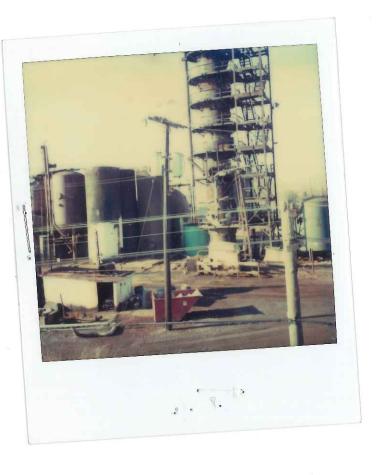
Enclosures (3)



SCALE: 1 TW' SFEET

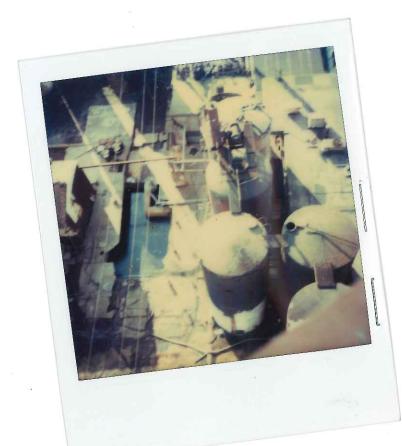
EPA Form 3610 1 (6-88)

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106 West 14th Street Suite 2406 Kansas City, Missouri 64105 Area code 816-421-8494

November 19, 1980

EPA Region 5 RCRA Activities P.O. Box 7861 Chicago, Illinois 60680

RE: Conservation Chemical Company of Illinois

EPA I.D. No. IND040888992

Gentlemen:

On November 18th, 1980, we submitted to you Part A of the RCRA permit application. In reviewing Form 3 of Part A, we discovered that we had failed to include applicable information on pages 1, 3 and 5. The attached pages 1, 3 and 5 contain the information left off originally. We submit these as amendments to our initial application.

We are also enclosing complete topographic maps of the Highland and Whiting, Indiana quadrangles. Although we have already submitted the applicable portions of these maps with Form I, the larger sheets provide a better indication of the plant location.

Please let us know if you have any questions about the foregoing.

Very truly yours,

CONSERVATION CHEMICAL COMPANY OF ILLINOIS

Norman B. Hjersted

President 6

NBH/psc

Enclosures (3)

